

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS  | ID NO. | DATE    |
|---------------------------|-----------|--------|---------|
| FEE DETERMINATION         | in re nat |        | 8/22/01 |
| O.I.P.E. CLASSIFIER       |           | 10     | 8-31-01 |
| FORMALITY REVIEW          | TR        | 1112   | 9/20/01 |
| RESPONSE FORMALITY REVIEW |           |        |         |

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim    | Date    |
|----------|---------|
| Final    |         |
| Original | 9/22/01 |
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| Claim    | Date    |
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| Final    |         |
| Original | 9/22/01 |
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| Claim    | Date |
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| Final    |      |
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If more than 150 claims or 10 actions  
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This page is a continuation of page \_\_\_\_\_.

This page is a continuation of application serial number \_\_\_\_\_.

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